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State or Province:: CA

Country:: US

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## CORRESPONDENCE INFORMATION

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Fax One:: 661-362-1507

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## APPLICATION INFORMATION

Title Line One:: High Contact Count, Sub-miniature, Fully

Title Line Two:: Implantable Cochlear Prosthesis

Total Drawing Sheets:: 6 Formal Drawings?:: No

Application Type:: Utility Docket Number:: AB-131U

Secrecy Order in Parent Appl.?:: No

## REPRESENTATIVE INFORMATION

Representative Customer Number:: 23845

Registration Number One:: 29715 Registration Number Two:: 44724 Registration Number Three:: 47424

## CONTINUITY INFORMATION

This application is a:: NON PROV. OF PROVISIONAL > Application One:: 60/193647

Filing Date:: 03-31-2000

This application is a:: NON PROV. OF PROVISIONAL > Application Two:: 60/203707

Filing Date:: 05-11-2000

Source:: PrintEFS Version 1.0.1